State and Zip Code Telephone Number E-mail Address

UNITED STATES DISTRICT COURT

		tor the	LUZU CAM [7]	A 10: 13	
	Northern	District of Al		Timer	- 4
Christopher L	ynn Koger Se	Cas))	te No.	e filled in by the Cl	erk's Office)
(Write your full name. No more t in a pro se complaint.)	idtiff han one plaintiff may be named))) Jury	/Trial: (check o	one) [Yes	□ No
Constellium	1 Of Musclesh	Eds}			
names of all the defendants canno write "see attached" in the space with the full list of names.)	Of lift in the space above places)			
CO	MPLAINT FOR EM	PLOYMEN'	T DISCRIM	IINATION	
I. The Parties to Thi	s Complaint				
A. The Plaint	iff(s)				
Provide the needed.	information below for each	h plaintiff name	ed in the comp	laint. Attach ad	lditional pages if
· Na	me	Christo	pher 1	unn k	Longe so
	eet Address	1620	Houston	R.L.	yu or
Cit	y and County	Florence	p Beto	L au	000000

Check here to receive electronic notice through the email listed above. By checking this box, the undersigned consents to electronic service and waives the right to personal service by first class mail pursuant to Federal Rules of Civil Procedure 5(b)(2), except with regard to service of a summons and complaint. The Notice of Electronic Filing will allow one free look at the document, and any attached PDF may be printed or saved.				
Date	Participant Si	gnature		
	m, p,			
В.	The Defendant(s)			
	marriadar, a government agency, a	each defendant named in the complaint, whether the defendant is an in organization, or a corporation. For an individual defendant, nown). Attach additional pages if needed.		
	Defendant No. 1			
	Name	Constellium of Muscle Shoods		
	Job or Title (if known)	estimini of Muscle stroats		
	Street Address	4805 E and St		
	City and County	Muscle Shoals Colbert		
	State and Zip Code	35661 Alabana		
	Telephone Number	256-386-6000		
	E-mail Address (if known)			
	Defendant No. 2			
	Name			
	Job or Title (if known)			
	Street Address			
	City and County			
	State and Zip Code			
	Telephone Number			
	E-mail Address (if known)			
	Defendant No. 3			
	Name			
	Job or Title (if known)			
	Street Address			
	City and County			
	State and Zip Code			
	Telephone Number	1		
	E-mail Address (if known)			

Other federal law (specify the federal law):

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination				
			Relevant state law (specify, if known):	
			Relevant city or county law (specify, if known):	
III.	State	ment of Cl	aim	
	invol the d	snowing the ved and whates and place a short and	d plain statement of the claim. Do not make legal arguments. State as briefly as possible the at each plaintiff is entitled to the damages or other relief sought. State how each defendant was at each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including aces of that involvement or conduct. If more than one claim is asserted, number each claim and plain statement of each claim in a separate paragraph. Attach additional pages if needed.	
				
		L	Failure to hire me.	
		7	Termination of my employment.	
			Failure to promote me.	
		L	Failure to accommodate my disability.	
			Unequal terms and conditions of my employment.	
			Retaliation.	
			Other acts (specify):	
			(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)	
	В.	It is my	best recollection that the alleged discriminatory acts occurred on date(s)	
		Man	24, 2019	
	C.	I believ	e that defendant(s) (check one):	
		Г	is/are still committing these acts against me.	
			is/are not still committing these acts against me.	
		٦		

Pro S	e 7 (Rev. 09	9/16) Complaint for Em	ployment Discrimination
. D.	Defen	dant(s) discrimin	ated against me based on my (check all that apply and explain): race color gender/sex religion national origin age (year of birth) (only when asserting a claim of age discrimination.) disability or perceived disability (specify disability)
	E. WYC SU	The facts of non Spalla one size of spension attacking	my case are as follows. Attach additional pages if needed. Was called to Conference for 19 coils produced on my shift but not scrapped. Was placed on pending investigation, then terminated on 5/24/) papers from EEOC
		7 6-7.	ditional support for the facts of your claim, you may attach to this complaint a copy of iled with the Equal Employment Opportunity Commission, or the charge filed with the or city human rights division.)
īv.	Exhau	· stion of Federal	Administrative Remedies
	A.	It is my best romy Equal Empon (date)	ecollection that I filed a charge with the Equal Employment Opportunity Commission or ployment Opportunity counselor regarding the defendant's alleged discriminatory conduct
		June 5	2019
	В.	The Equal Em	ployment Opportunity Commission (check one): has not issued a Notice of Right to Sue letter. issued a Notice of Right to Sue letter, which I received on (date) (Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

Pro Se 7 (Rev. 09/16) Complaint for Employment Discrimination

C.	Only litigant	s alleging age discrimination must answer this question.	
	Since filing regarding the	ny charge of age discrimination with the Equal Employment Opportunity Commission defendant's alleged discriminatory conduct (check one):	
		60 days or more have elapsed.	

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

loss of wages and finances to support family public humiliation

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:	17/20
Signature of Plaintiff	Chulot Syn Va 35rc
Printed Name of Plaintiff	Christopha Lynn Koger son

Pro Sc 7 (Rev. 09/16) Complaint for Employment Discrimination

В.	For Attorneys
	Date of signing:
	Signature of Attorney
	Printed Name of Attorney
	Bar Number
	Name of Law Firm
	Street Address
	State and Zip Code
	Telephone Number
	E-mail Address

EEOC Form 161 (11/16)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

	DISMISSAL AND NOTICE	OI MOIIIO		
1620	topher L. Koger F Houston St nce, AL 35630	Ridge Park Place 1130 22nd Street Birmingham, AL 35205		
	On behalf of person(s) aggrieved whose identity is CONFIDENTIAL (29 CFR §1601.7(a))			
EEOC Charge	e No. EEOC Representative	Telephone No.		
	ANDRE D. WILLIAMS,			
420-2019-0	02409 Investigator	(205) 212-2147		
THE EEO	IS CLOSING ITS FILE ON THIS CHARGE FOR THE FO	LLOWING REASON:		
	The facts alleged in the charge fail to state a claim under any of	the statutes enforced by the EEOC.		
	Your allegations did not involve a disability as defined by the An	nericans With Disabilities Act.		
	The Respondent employs less than the required number of emp	ployees or is not otherwise covered by the statutes.		
	Your charge was not timely filed with EEOC; in other work discrimination to file your charge	ds, you waited too long after the date(s) of the alleged		
X	The EEOC issues the following determination: Based upon information obtained establishes violations of the statutes. Thi the statutes. No finding is made as to any other issues that mig	s does not certify that the respondent is in compliance with		
	The EEOC has adopted the findings of the state or local fair em	ployment practices agency that investigated this charge.		
	Other (briefly state)			
	- NOTICE OF SUIT R (See the additional information attack)			
Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit must be filed WITHIN 90 DAYS of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)				
Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.				
	On behalf of the	Commission		
	MALI MICHA	1.1.71		
Enclosures(s	BRADLEY A. ANDE	RSON, (Date Mailed)		
St				

2001 Park Place, Suite 1500 Birmingham, AL 35203

Enclosure with EEOC Form 161 (11/16)

INFORMATION RELATED TO FILING SUIT UNDER THE LAWS ENFORCED BY THE EEOC

(This information relates to filing suit in Federal or State court <u>under Federal law.</u>

If you also plan to sue claiming violations of State law, please be aware that time limits and other provisions of State law may be shorter or more limited than those described below.)

PRIVATE SUIT RIGHTS

Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA), the Genetic Information Nondiscrimination Act (GINA), or the Age Discrimination in Employment Act (ADEA):

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge <u>within 90 days</u> of the date you receive this Notice. Therefore, you should keep a record of this date. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed within 90 days of the date this Notice was mailed to you (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Courts often require that a copy of your charge must be attached to the complaint you file in court. If so, you should remove your birth date from the charge. Some courts will not accept your complaint where the charge includes a date of birth. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred **more than 2 years (3 years) before you file suit** may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit before 7/1/10 — not 12/1/10 — in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do <u>not</u> relieve you of the requirement to bring suit within 90 days.

ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, please make your review request within 6 months of this Notice. (Before filing suit, any request should be made within the next 90 days.)

IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.

EEOC Form 5 (11/09)

This form is effected by the Privacy Act of 1976, See eclosed Privacy Act I EDC 420-2019-02409 Name Statement and other information before completing this form. Italian I EDC	Charge of Discrimination	Charge Presented To: Agency(ies) Charge No(s):			
Name (Indicate Me, Me, Me) Transition food Agency, Visual Internation (256) 263-0253 1967 Street Address Against the Complyone, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Decriminated Against the or others. (Vimore than two, Int under PARTICULAR'S below) Name (In the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Decriminated Against the or others. (Vimore than two, Int under PARTICULAR'S below) Name (In the Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Decriminated Against the or others. (Vimore than two, Int under PARTICULAR'S below) Name (In the Organization Committee) (In the Employer, Members) (In	This form is affected by the Privacy Act of 1974. See enclosed Privacy Act				
Street Address City, State and ZIP Code No. Employer, Liber Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That is Believe Discriminated Against Me or Others, (If more than two, Init under PART/CULARS bedieve) Name No. Employers, Liber Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That is Believe Discriminated Against Me or Others, (If more than two, Init under PART/CULARS bedieve) Name No. Employers, Members Place No. CONSTELLIUM Name No. Employers, Members Place No. CONSTELLIUM Name No. Employers, Members Place No. CONSTELLIUM Name No. Employers, Members Place No. Construction of Check agency producted boutcas) Street Address City, State and ZIP Code NATIONAL CRICIN Street Address City, State and ZIP Code NATIONAL CRICIN NATIONAL CRICIN NATIONAL CRICIN NATIONAL CRICIN NATIONAL CRICIN NATIONAL CRICIN STREET AND COLOR SEX RELIGION NATIONAL CRICIN THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, street area selectify). THE PARTICULASS ARE (If additional pages is needed, str	Statement and other information before completing this form,	X	EEOC	42	0-2019-02409
State or heal Agency, If any Mr. Christopher L Koger City, State and ZIP Code City, State and ZIP Code Name in the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Distriminated Against the or Others, (If more than two, list under PARTICULAS Sudicus) Name No. Employers, Member Place No. CONSTELLIUM CONSTELLIUM CONSTELLIUM CONSTELLIUM Name No. Employers, Member Place No. CONSTELLIUM Street Address City, State and ZIP Code ARTICOLAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If additional paper is needed, attain bears sheet(s)) THE PARTICULAS ARE (If addition	null		J		and EEOC
Mr. Christopher I. Koger (256) 263-0253 1967 Street Address (190, State and ZIP Code Code		cy, if any			
Street Address City, State and ZIP Code City State and ZIP Code			Home Phone		Year of Birth
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Bioriminated Against Me or Others. (If more than two, list under PARTICULARS below.) Name No. Employers, Members Phone No. (256) 386-6000			(256) 263-0253	3	1967
Name	City, State at	nd ZIP Code			
Name No. Employees, Members Phone No. (256) 386-6000	1620 Houston St, FLORENCE, AL 35630				
Street Address City, State and ZIP Code Street Address City, State and ZIP Code	Against Me or Others. (If more than two, list under PARTICULARS below.)	nittee, or State or	Local Government Agency	That I Be	elieve Discriminated
Street Address City, State and ZIP Code No. Employees, Members Phone No.			No. Employees, Members		
No. Employees, Members Phone No. Street Address City, State and ZIP Code DISCRIMINATION BASED ON (Check appropriate box(ex).) RETALLATION ACE DISABILITY GENETIC INFORMATION TOOK PLACE Earliest Latest 05-24-2019 05-24-2019 05-24-2019 07-1018 (Specify) OTHER (Specify) ACE DISABILITY GENETIC INFORMATION CONTINUING ACTION THE PARTICULARS ARE (if additional paper is needed, attach extra sheet(s): I am an African American. I was employed by the above named employer for over 7 years. Most recently, I was a supervisor. On May 21, 2019, my crew produced 19 coils that were the wrong width. The Process Engineer falsified width on the DQC and the historian was reading incorrectly. On May 22, 2019, I was called to the office and placed on supervisor. During the week of May 5, 2019, I was given an annual performance review which met all expectations of a supervisor. During the week of May 5, 2019, I was given an annual performance review which met all expectations, exceeded some, and I was given a pay increase. Supervisor Mike Duvall (white) had a similar issue on November 17, 2018. The Process Engineer was discharged, and Mr. Duvall kept his job. Supervisor Kurt Anderson (white) had multiple infractions before any disciple was given to him. I was discharged after one incident. I believe I was discriminated against because of my race (African American), in violation of Title VII of the Civil Rights Act of 1964, as amended. I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them to the processing of my charge in accordance with their processing the processing of my charge in accordance with their processing the processing of my charge in accordance with their processing.				((256) 386–6000
Name No. Employees, Members Phone No.	City, state at	nd ZIP Code			
Street Address City, State and ZIP Code DISCRIMINATION BASED ON (Check appropriate box(es).) RECOLOR RETALIATION ACE DISABILITY GENETIC INFORMATION ACE DISABILITY GENETIC INFORMATION CONTINUING ACTION THE PARTICULARS ARE (Instablishinal paper is needed attach extra sheet(s)): I am an African American. I was employed by the above named employer for over 7 years. Most recently, I was a supervisor. On May 21, 2019, my crew produced 19 coils that were the wrong width. The Process Engineer falsified width on the DQC and the historian was reading incorrectly, On May 22, 2019, I was called to the office and placed on supension pending investigation. I was discharged on May 24, 2019, and it was said that I did not meet the expectations of a supervisor. During the week of May 5, 2019, I was given an annual performance review which met all expectations, exceeded some, and I was given a pay increase. Supervisor Mike Duvall (white) had a similar issue on November 17, 2018. The Process Engineer was discharged, and Mr. Duvall kept his job. Supervisor Kurt Anderson (white) had multiple infractions before any disciple was given to him. I was discharged after one incident. I believe I was discriminated against because of my race (African American), in violation of Title VII of the Civil Rights Act of 1964, as amended. I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I was or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE	4805 E. Second St, MUSCLE SHOALS, AL 35661				
Street Address City, State and ZIP Code DISCRIMINATION BASED ON (Check appropriate box(es).) RECOLOR RETALIATION ACE DISABILITY GENETIC INFORMATION ACE DISABILITY GENETIC INFORMATION CONTINUING ACTION THE PARTICULARS ARE (Instablishinal paper is needed attach extra sheet(s)): I am an African American. I was employed by the above named employer for over 7 years. Most recently, I was a supervisor. On May 21, 2019, my crew produced 19 coils that were the wrong width. The Process Engineer falsified width on the DQC and the historian was reading incorrectly, On May 22, 2019, I was called to the office and placed on supension pending investigation. I was discharged on May 24, 2019, and it was said that I did not meet the expectations of a supervisor. During the week of May 5, 2019, I was given an annual performance review which met all expectations, exceeded some, and I was given a pay increase. Supervisor Mike Duvall (white) had a similar issue on November 17, 2018. The Process Engineer was discharged, and Mr. Duvall kept his job. Supervisor Kurt Anderson (white) had multiple infractions before any disciple was given to him. I was discharged after one incident. I believe I was discriminated against because of my race (African American), in violation of Title VII of the Civil Rights Act of 1964, as amended. I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I was or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE		·	ş	·	
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CP Enclosure with EEOC Form 5 (11/09)

PRIVACY ACT STATEMENT: Under the Privacy Act of 1974, Pub. Law 93-579, authority to request personal data and its uses are:

- 1. FORM NUMBER/TITLE/DATE. EEOC Form 5, Charge of Discrimination (11/09).
- 2. AUTHORITY. 42 U.S.C. 2000e-5(b), 29 U.S.C. 211, 29 U.S.C. 626, 42 U.S.C. 12117, 42 U.S.C. 2000ff-6.
- 3. PRINCIPAL PURPOSES. The purposes of a charge, taken on this form or otherwise reduced to writing (whether later recorded on this form or not) are, as applicable under the EEOC anti-discrimination statutes (EEOC statutes), to preserve private suit rights under the EEOC statutes, to invoke the EEOC's jurisdiction and, where dual-filling or referral arrangements exist, to begin state or local proceedings.
- **4. ROUTINE USES.** This form is used to provide facts that may establish the existence of matters covered by the EEOC statutes (and as applicable, other federal, state or local laws). Information given will be used by staff to guide its mediation and investigation efforts and, as applicable, to determine, conciliate and litigate claims of unlawful discrimination. This form may be presented to or disclosed to other federal, state or local agencies as appropriate or necessary in carrying out EEOC's functions. A copy of this charge will ordinarily be sent to the respondent organization against which the charge is made.
- 5. WHETHER DISCLOSURE IS MANDATORY; EFFECT OF NOT GIVING INFORMATION. Charges must be reduced to writing and should identify the charging and responding parties and the actions or policies complained of. Without a written charge, EEOC will ordinarily not act on the complaint. Charges under Title VII, the ADA or GINA must be sworn to or affirmed (either by using this form or by presenting a notarized statement or unsworn declaration under penalty of perjury); charges under the ADEA should ordinarily be signed. Charges may be clarified or amplified later by amendment. It is not mandatory that this form be used to make a charge.

NOTICE OF RIGHT TO REQUEST SUBSTANTIAL WEIGHT REVIEW

Charges filed at a state or local Fair Employment Practices Agency (FEPA) that dual-files charges with EEOC will ordinarily be handled first by the FEPA. Some charges filed at EEOC may also be first handled by a FEPA under worksharing agreements. You will be told which agency will handle your charge. When the FEPA is the first to handle the charge, it will notify you of its final resolution of the matter. Then, if you wish EEOC to give Substantial Weight Review to the FEPA's final findings, you must ask us in writing to do so within 15 days of your receipt of its findings. Otherwise, we will ordinarily adopt the FEPA's finding and close our file on the charge.

NOTICE OF NON-RETALIATION REQUIREMENTS

Please **notify** EEOC or the state or local agency where you filed your charge **if retaliation** is **taken against you or others** who oppose discrimination or cooperate in any investigation or lawsuit concerning this charge. Under Section 704(a) of Title VII, Section 4(d) of the ADEA, Section 503(a) of the ADA and Section 207(f) of GINA, it is unlawful for an *employer* to discriminate against present or former employees or job applicants, for an *employment agency* to discriminate against anyone, or for a *union* to discriminate against its members or membership applicants, because they have opposed any practice made unlawful by the statutes, or because they have made a charge, testified, assisted, or participated in any manner in an investigation, proceeding, or hearing under the laws. The Equal Pay Act has similar provisions and Section 503(b) of the ADA prohibits coercion, intimidation, threats or interference with anyone for exercising or enjoying, or aiding or encouraging others in their exercise or enjoyment of, rights under the Act.